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**PATENT, TRADEMARK, COPYRIGHT
AND UNFAIR COMPETITION LAW
AND RELATED LITIGATION**

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**TO: The Honorable Commissioner
Attention: George R. Koch
Art Unit 1734**

FROM: David H. Brinkman

Fax No.: (703) 872-9311

Phone: (513) 241-2324

Date: June 23, 2003

Fax: (513) 421-7269

Pages (including cover page): 14

**Re: U.S. Serial No. 09/821,618 FLOATING HEAD LIQUID DISPENSER WITH
DISPENSING HEAD SENSOR**

ATTACHMENTS/COMMENTS: OFFICIAL

Please deliver to George R. Koch

Amendment Transmittal (3 pages)

After Final Amendment (10 pages)

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted
to the Patent and Trademark Office fax number (703) 872-9311 on the
date shown below.

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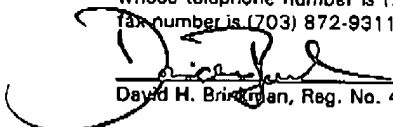
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Date

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I hereby certify that this correspondence is being deposited via facsimile to The Honorable Commissioner in the United States Patent and Trademark Office, Attention: George R. Koch whose telephone number is (703) 306-3435 and fax number is (703) 872-9311 on June 23, 2003.


David H. Brinkman, Reg. No. 40,532

Date

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Michael J. Romine
Serial No.: 09/821,618
Filed: March 29, 2001
Confirmation No.: 4107
Group Art Unit: 1734
Examiner: Koch, George R.
Title: **FLOATING HEAD LIQUID DISPENSER WITH DISPENSING HEAD SENSOR**
Atty Docket: NOR-979

Cincinnati, Ohio 45202

June 23, 2003

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.
2. ☐ Small Entity status is claimed.
☒ Other than a Small Entity.
3. The fee has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		LARGE ENTITY	
Claims Remaining After Amendment		Highest No. Previously Paid For		Extra	Present Rate	Fee	Present Rate	Fee
TOTAL	10	MINUS	20	= 0	x \$9	\$0	x \$18	\$0
INDEP.	2	MINUS	3	= 0	x \$42	\$0	x \$84	\$0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$140	\$0	+ \$280	\$0
TOTALS					TOTAL FEE	\$0	TOTAL FEE	\$0

- ☆ If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ☆☆ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 ☆☆☆ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid for" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☒ No additional fee for claims is required.

4. Attached is a check in the sum of \$_____.

_____ Please charge my Deposit Account No. 23-3000 in the amount of \$_____.

5. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Complete (a) or (b) as applicable.

- (a) _____ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
___	one month	\$ 110.00	\$ 55.00
___	two months	\$ 400.00	\$200.00
___	three months	\$ 890.00	\$445.00
___	four months	\$1,390.00	\$695.00

___ Attached is a check in the amount of \$ ___ for the ___ month extension fee as required by 37 C.F.R. § 1.17(c)

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

___ An extension for ___ months has already been secured and the fee paid thereof of \$ ___ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$ ____.

OR

(b) X Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

X If any additional fee for claims or extension of time is required, charge Account No. 23-3000.

Respectfully submitted,

WOOD, HERRON & EVANS, L.L.P.



David H. Brinkman
Reg. No. 40,532

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